

**COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am an original, first and joint inventor of the subject matter that is claimed and for which a utility patent is sought on the invention entitled:

**INTERACTIVE SYSTEM AND METHOD FOR RECORDING AND ASSESSING A
PERSON'S INHERITED RISK FOR A RANGE OF DISEASES**

the specification of which:

- ☐ was filed on _____, as United States Non-Provisional
Application No. _____ bearing Attorney Docket No. _____
- ☒ is attached hereto.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information that is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

- ☐ I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application designating at least one country other than the United States listed below and have also identified below any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.

			Priority Claimed	
			<input type="checkbox"/>	<input type="checkbox"/>
(Number)	(Country - if PCT, so indicate)	(dd/mm/yy Filed)	Yes	No
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
(Number)	(Country - if PCT, so indicate)	(dd/mm/yy Filed)	Yes	No

Applicants: COLE et al.

Application: To be Assigned

- ☒ I hereby claim the benefit under Title 35, United States Code, § 119(e) or §120 of any United States application(s), or §365(c) of any PCT International application(s) designating the United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

U.S. Parent Application Serial Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
60/280,780	04/02/01	

PCT International Applications designative the United States:

PCT Parent Application Serial Number	U.S. Serial Number	PCT Filing Date (MM/DD/YYYY)
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I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Attorney or Agent	Registration No.	Attorney or Agent	Registration No.
Kevin Ainsworth	39,586	Christina Karnakis	45,899
Ingrid Beattie	42,306	Robert Klauzinski	42,742
William Belanger	40,509	Kristin E. Konzak	44,848
Naomi Biswas	38,384	Cynthia Kozakiewicz	42,764
Duane Blake	47,279	Barry Marenberg	40,715
Yong Choi	43,324	William Marino	44,219
David F. Crosby	36,400	A. Jason Mirabito	28,161
Brett N. Dorny	35,860	Michel Morency	Limited Recognition
Marianne Downing	42,870	Carol H. Peters	45,010
Ivor R. Elrifi	39,529	David Poirier	43,007
Heidi A. Erlacher	45,409	Michael Renaud	44,299
Christina Gadiano	37,628	Brian Rosenbloom	41,276
James G. Gatto	32,694	Thomas M. Sullivan	39,392
Richard Gervase	P-46,725	Janine Susan	46,119
John A. Harre	37,345	Howard Susser	33,556
Brian P. Hopkins	42,669	Shelby J. Walker	45,192
Shane Hunter	41,858		
David E. Johnson	41,874		

Applicants: COLE et al.

Application: *To be Assigned*

all of MINTZ, LEVIN, COHN, FERRIS, GLOVSKY AND POPEO PC, One Financial Center, Boston, Massachusetts 02111, as Applicant's attorneys with full power of substitution and revocation to take any and all action necessary with regard to the above-identified patent.

Address all telephone calls to Brian S. Rosenbloom at telephone number 703/464-4800.

Address all correspondence to:

Brian S. Rosenbloom
Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C.
11911 Freedom Drive, Suite 400
Reston, Virginia 20190

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or patent issued thereon.



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Date

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05/14/2001 11:38 550-555-7299

GENETIC HEALTH

PAGE 02

Applicants: COLE et al.**Application: To be Assigned**

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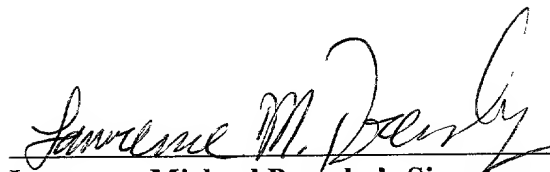
Louis Scott Cole's Signature**Date**

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Applicants: COLE et al.
Application: To be Assigned

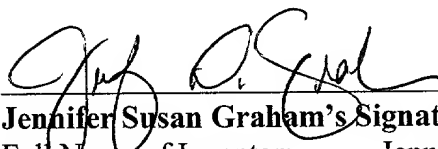


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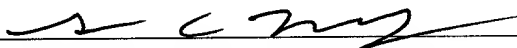


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Applicants: COLE et al.
Application: To be Assigned



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Applicants: COLE et al.
Application: To be Assigned

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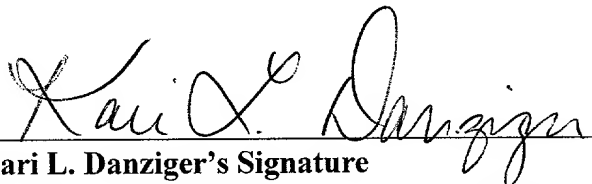
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Applicants: COLE et al.
Application: To be Assigned



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Residence: 2170 Middlefield Rd.
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Post Office Address: same

Date

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VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 C.F.R. 1.9(f) AND 1.27(c)) SMALL BUSINESS			Docket No. 21132-006
Serial No. To be Assigned	Filing Date Herewith	Patent No.	Issue Date
Applicant/Patentee: Louis Scott Cole, Adam Lawrence Lowe, Lawrence Michael Pinsky, Jennifer Susan Graham, George Clement Morris, Jr., Ronald Charles Horn, II, John Norman Vlg, Minam Suzanne Komaromy, Karl L. Danziger, And John Chul-Yang Shoo			
Invention: INTERACTIVE SYSTEM AND METHOD FOR RECORDING AND ASSESSING A PERSON'S INHERITED RISK FOR A RANGE OF DISEASES			
I hereby declare that I am: <input type="checkbox"/> the owner of the small business concern identified below: <input checked="" type="checkbox"/> an official of the small business concern empowered to act on behalf of the concern identified below: NAME OF CONCERN: Genetic Health, Inc. ADDRESS OF CONCERN: 1720 South Amphlett Way, Suite 130 San Mateo, California 94402 I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 C.F.R. 121.3-18, and reproduced in 37 C.F.R. 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both. I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the above-identified invention described in: <input checked="" type="checkbox"/> the specification filed herewith with title as listed above. <input checked="" type="checkbox"/> the application identified above. <input type="checkbox"/> the patent identified above. If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed on the next page and no rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 C.F.R. 1.9(c) or by any concern which would not qualify as a small business concern under 37 C.F.R. 1.9(d) or a nonprofit organization under 37 C.F.R. 1.9(e).			

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Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☒ No such person, concern or organization exists.
☐ Each such person, concern or organization is listed below.

FULL NAME:

ADDRESS:

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

FULL NAME:

ADDRESS:

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

FULL NAME:

ADDRESS:

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as a small entity (37 C.F.R. 1.27).

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 C.F.R. 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: Louis Scott Cole

TITLE OF PERSON SIGNING OTHER
THAN OWNER: President

SIGNATURE:



DATE: 5/22/01

RES 42022V1

Patent and Trademark Office-U.S. DEPARTMENT OF COMMERCE

TOTAL P.05